



## Complete Summary

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### TITLE

Veteran satisfaction: percent of patients reporting the overall quality of Veterans Administration (VA) care as very good or excellent (recent inpatients).

### SOURCE(S)

Office of Quality and Performance (10Q). FY 2005 VHA executive career field network director performance measurement system and JCAHO hospital core measures. Technical manual. Washington (DC): Veterans Health Administration (VHA); 2005 Mar 9. 244 p.

## Measure Domain

### PRIMARY MEASURE DOMAIN

Patient Experience

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

### SECONDARY MEASURE DOMAIN

Does not apply to this measure

## Brief Abstract

### DESCRIPTION

This measure assesses the percent of recent inpatients reporting overall quality of Veterans Administration (VA) care received as very good or excellent.

### RATIONALE

Presidential Executive Order 12862 was issued in September 1993. This Executive Order required agencies to publish customer service standards, survey their respective customers, and use customer feedback information to manage the agency. Veteran patient satisfaction surveying is designed to promote health care quality assessment and improvement strategies that address patients' needs and concerns as defined by patients. In 1995, Veterans Health Administration (VHA) began surveying its patients using a standardized instrument modeled from the Picker Institute, a non-profit health care surveying group. The Performance

Analysis Center for Excellence (PACE) of the Office of Quality & Performance (OQP) is the analytical, methodological, and reporting staff for Veteran Satisfaction Surveys.

#### PRIMARY CLINICAL COMPONENT

Veteran satisfaction; inpatients; quality of care

#### DENOMINATOR DESCRIPTION

All patients admitted to and discharged alive from an acute care setting responding to the Survey of Healthcare Experiences of Patients (SHEP) (see the related "Denominator Inclusions/Exclusions" field in the Complete Summary)

#### NUMERATOR DESCRIPTION

The number of recent inpatients from the denominator reporting overall quality of Veterans Administration (VA) care received as very good or excellent

### Evidence Supporting the Measure

#### EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

### Evidence Supporting Need for the Measure

#### NEED FOR THE MEASURE

Use of this measure to improve performance

#### EVIDENCE SUPPORTING NEED FOR THE MEASURE

Office of Quality and Performance (10Q). FY 2005 VHA executive career field network director performance measurement system and JCAHO hospital core measures. Technical manual. Washington (DC): Veterans Health Administration (VHA); 2005 Mar 9. 244 p.

Perlin JB, Kolodner RM, Roswell RH. The Veterans Health Administration: quality, value, accountability, and information as transforming strategies for patient-centered care. Am J Manag Care 2004 Nov; 10(11 Pt 2): 828-36. [PubMed](#)

### State of Use of the Measure

#### STATE OF USE

Current routine use

## CURRENT USE

External oversight/Veterans Health Administration  
Internal quality improvement

## Application of Measure in its Current Use

### CARE SETTING

Hospitals

### PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

### LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

### TARGET POPULATION AGE

Unspecified

### TARGET POPULATION GENDER

Either male or female

### STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

## Characteristics of the Primary Clinical Component

### INCIDENCE/PREVALENCE

Unspecified

### ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

### BURDEN OF ILLNESS

Unspecified

### UTILIZATION

Unspecified

## COSTS

Unspecified

### Institute of Medicine National Healthcare Quality Report Categories

## IOM CARE NEED

End of Life Care  
Getting Better  
Living with Illness  
Staying Healthy

## IOM DOMAIN

Patient-centeredness

### Data Collection for the Measure

## CASE FINDING

Users of care only

## DESCRIPTION OF CASE FINDING

All patients admitted to and discharged alive from an acute care setting are eligible for survey selection.

## DENOMINATOR SAMPLING FRAME

Patients associated with provider

## DENOMINATOR INCLUSIONS/EXCLUSIONS

### Inclusions

All patients admitted to and discharged alive from an acute care setting responding to the Survey of Healthcare Experiences of Patients (SHEP)\*

\*Note:

Veterans Health Service Standards: Dimensions of health care identified as important by veteran patients.

The veteran satisfaction surveys are aimed at capturing patient perceptions of care on the following Veteran Service Standards (VSS):

- Access - We will provide you with timely access to health care.
- Coordination - We will take responsibility for coordination of your health care.
- Courtesy - We will treat you with courtesy and dignity.

- Education - We will strive to provide information and education about your health care that you understand.
- Emotional Support - We will provide support to meet your emotional needs.
- Involvement of Family and Friends - We will provide opportunities to involve your family in your care when appropriate.
- Physical Comfort - We will strive to meet your physical comfort needs.
- Patient Preferences - We will ensure that you are involved with decisions about your care.
- Transition - We will provide smooth transition between your inpatient and outpatient care.
- Continuity - One health care team or provider will be in charge of your care.
- Pharmacy - We will provide you with timely and appropriate Pharmacy Services.
- Specialist Care - We will coordinate all your Specialist care in a timely manner.

#### Exclusions

Unspecified

#### DENOMINATOR (INDEX) EVENT

Institutionalization

#### DENOMINATOR TIME WINDOW

Time window is a single point in time

#### NUMERATOR INCLUSIONS/EXCLUSIONS

##### Inclusions

The number of recent inpatients from the denominator reporting overall quality of Veterans Administration (VA) care received as very good or excellent

##### Exclusions

Unspecified

#### NUMERATOR TIME WINDOW

Institutionalization

#### DATA SOURCE

Administrative data

Patient survey

#### LEVEL OF DETERMINATION OF QUALITY

Not Individual Case

#### PRE-EXISTING INSTRUMENT USED

Unspecified

## Computation of the Measure

### SCORING

Weighted Score/Composite/Scale

### INTERPRETATION OF SCORE

Better quality is associated with a higher score

### ALLOWANCE FOR PATIENT FACTORS

Unspecified

### STANDARD OF COMPARISON

Internal time comparison  
Prescriptive standard

### PRESCRIPTIVE STANDARD

Fiscal year (FY) 2005 targets for Veteran Satisfaction - Inpatient:

- Meets Target: 73%
- Exceeds Target: 75%

### EVIDENCE FOR PRESCRIPTIVE STANDARD

Office of Quality and Performance (10Q). FY 2005 VHA executive career field network director performance measurement system and JCAHO hospital core measures. Technical manual. Washington (DC): Veterans Health Administration (VHA); 2005 Mar 9. 244 p.

## Evaluation of Measure Properties

### EXTENT OF MEASURE TESTING

Unspecified

## Identifying Information

### ORIGINAL TITLE

Veteran satisfaction: inpatient care.

### MEASURE COLLECTION

Fiscal Year (FY) 2005: Veterans Health Administration (VHA) Performance Measurement System

DEVELOPER

Veterans Health Administration

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2002 Mar

REVISION DATE

2005 Mar

MEASURE STATUS

Please note: This measure has been updated. The National Quality Measures Clearinghouse is working to update this summary.

SOURCE(S)

Office of Quality and Performance (10Q). FY 2005 VHA executive career field network director performance measurement system and JCAHO hospital core measures. Technical manual. Washington (DC): Veterans Health Administration (VHA); 2005 Mar 9. 244 p.

MEASURE AVAILABILITY

The individual measure, "Veteran Satisfaction: Inpatient Care," is published in "FY 2005 VHA Performance Measurement System: Technical Manual."

For more information contact:

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NQMC STATUS

This NQMC summary was completed by ECRI on January 11, 2005. The information was verified by the measure developer on February 17, 2005.

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